

Foster Family Home - Corrective Action Report

Provider ID: 1-190095

Home Name: Guillerma Haber, CNA

84-549 Nukea Street

Waianae

HI 96792

Review ID: 1-190095-1

Reviewer: David Ayling

Begin Date: 12/10/2019

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Home inspection for a new 2 person CCFFH certification. Corrective Action Report issued during home inspection with all items due to CTA by 1/10/20.

Foster Family Home Background Checks [11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1)(2) - No 1st year APS/CAN and fingerprints for CG #2.

Foster Family Home Personnel and Staffing [11-800-41]

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines; and

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(7) - No current TB clearance for CG #1 and CG #2.

41.(b)(8) - No current CPR and First Aid certification for CG #1. No current Blood Borne Pathogen certification for CG #1 and CG #2.

David Ayling
Compliance Manager

Guillerma Haber
Primary Care Giver

12/10/19
Date

12-10-19
Date

Community Care Foster Family Home (CCFFH)
Written Plan of Correction for Deficiencies
Listed in Corrective Action Report
Chapter 17-1454

CCFFH Name: GUILLERMA HABER

CCFFH Address: 84-549 Nukea Street Maunaloa Hawaii 96792

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
8.(a)(1/2)	I received current APS/CAN and fingerprint from CG#2 I put them in my CCFFH binder	11/28/19	I put the expiration dates for TB, APS/CAN fingerprint, CPR and First aid and Blood borne for all CG's
41.(b)(7)	I received current TB Clearance CG#1 and CG#2 and CPR, First aid and blood borne protection certificate CG#1 and CG#2	6/6/19 12/18/19 12/20/19	on my computer calendar for 1 month prior to expiration!

Primary Caregiver's Signature: Guillerma Haber

Print Name: GUILLERMA HABER

Date of Signature: 12-26-19